

**(INELIGIBLE PRODUCER OUTPUT RECORD)**

Format/Edits

| Field No. | Field Name                    | Begin Pos | Size | Picture | Field Edits   |
|-----------|-------------------------------|-----------|------|---------|---|
| 1         | Record Type                   | 1         | 2    | 9(02)   | Required. Must be 61.   |
| 2         | Id Type                       | 3         | 1    | 9(01)   | Will be: 1 = SSN<br>2 = EIN<br>5 = BIA Number   |
| 3         | ID Number                     | 4         | 9    | 9(09)   | ID Number of the Primary Insured or the SBI, depending on the Record Number.<br>If ID Type eq '1' - Valid SSN<br>If ID Type eq '2' - Numeric > 0<br>If ID Type eq '5' - First 5 digits are FIPS State and County Code |
| 4         | Record Number                 | 13        | 3    | 9(03)   | Will be 001 if Ineligible Producer was reported as a primary insured.<br>Will be 002-999 if Ineligible Producer was reported as an SBI.   |
| 5         | Entity Type                   | 16        | 1    | X(01)   | Will be:<br>I = Individual<br>P = Partnership<br>X = All Others<br>B = Bureau of Indian Affairs   |
| 6         | Reporting Organization        | 17        | 2    | X(02)   | Reporting Organization that reported the producer as ineligible. (05= FSA, 06 = CAT Fee, 08= FCIC, 06 = CAT Fee Receivable)   |
| 7         | Reinsurance Year              | 19        | 4    | 9(04)   | Reinsurance year of the contract with the debt.   |
| 8         | Ineligibility Status Flag     | 23        | 2    | 9(02)   | See Exhibit 61-1 for values.  |
| 9         | Date of Ineligibility         | 25        | 8    | 9(08)   | Date ineligibility established (YYYYMMDD). (Reference the ITS Handbook)   |
| 10        | Indebtedness Eligibility Date | 33        | 8    | 9(08)   | Date eligibility was re-established in the case of a debt (YYYYMMDD).   |
| 11        | Notification Letter Date      | 41        | 8    | 9(08)   | Date the notification letter was sent to the producer (YYYYMMDD).   |
| 12        | Eligibility Reversal Date     | 49        | 8    | 9(08)   | Date of defaulted payment agreement or bankruptcy dismissal. (YYYYMMDD).  |
| 13        | CAT Ineligibility Flag        | 57        | 1    | X       | If 'Y', producer is ineligible to participate in the Catastrophic Risk Program (CAT) due to disqualification, debarment or suspension. Otherwise, will be 'N'.  |
| 14        | CAT Eligibility Date          | 58        | 8    | 9(08)   | Date that the producer eligibility is restored for CAT participation. (YYYYMMDD format).  |
| 15        | Buyup Ineligibility Flag      | 66        | 1    | X       | If 'Y', the producer is ineligible to participate in the buyup program due to disqualification, debarment or suspension. Otherwise, will be 'N'.  |

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| 16        | Buyup Eligibility Date                   | 67        | 8    | 9(08)   | Date that the producer eligibility is restored for buyup program participation. (YYYYMMDD format).                              |
| 17        | Controlled Substance Year of Eligibility | 75        | 4    | 9(04)   | Crop year that eligibility will be restored for producers convicted of controlled substance abuse violations.                   |
| 18        | Type 61 Record Filler                    | 79        | 7    | X(07)   | Blank.  |
| 19        | Last Name                                | 86        | 20   | X(20)   | Last Name of the Ineligible Producer/SBI as reported.   |
| 20        | First Name                               | 106       | 10   | X(10)   | First Name of the Ineligible Producer/SBI as reported.  |
| 21        | Middle Name                              | 116       | 10   | X(10)   | Middle Name of the Ineligible Producer/SBI as reported.   |
| 22        | Name Suffix                              | 126       | 5    | X(05)   | Name suffix (Jr, Sr, ...) of the Ineligible Producer/SBI as reported.   |
| 23        | Title                                    | 131       | 4    | X(04)   | Title (Dr, Mr, Ms ...) of the Ineligible Producer/SBI as reported.  |
| 24        | Business Name                            | 135       | 35   | X(35)   | Business name of the Ineligible Producer/SBI as reported.   |
| 25        | Address Line 1                           | 170       | 35   | X(35)   | Line 1 of the Street Address for the Ineligible Producer/SBI as reported.   |
| 26        | Address Line 2                           | 205       | 35   | X(35)   | Line 2 of the Street Address for the Ineligible Producer/SBI as reported.   |
| 27        | City                                     | 240       | 35   | X(35)   | Address City for the Ineligible Producer/SBI as reported.   |
| 28        | Address State                            | 275       | 2    | X(02)   | Address State for the Ineligible Producer/SBI as reported.  |
| 29        | Zip Code                                 | 277       | 5    | 9(05)   | Zip Code for the Ineligible Producer/SBI as reported.   |
| 30        | Zip Extension                            | 282       | 4    | 9(04)   | Zip code extension for the Ineligible Producer/SBI as reported.   |
| 31        | Contact Office Name                      | 286       | 35   | X(35)   | Name provided by the reporting organization of the office for the Ineligible Producer to contact in order to settle their debt. |
| 32        | Contact Office Phone                     | 321       | 10   | X(10)   | Telephone number of the Contact Office.   |
| 33        | Crop Year                                | 331       | 4    | 9(04)   | Crop year of the latest crop on the policy with the debt.   |
| 34        | RMA Data Processed Date                  | 335       | 8    | 9(08)   | Latest date that information was processed by ITS for the producer (YYYYMMDD).  |
| 35        | RMA Data Receipt Date                    | 343       | 8    | 9(08)   | Date that the data was originally received by RMA for processing in the ITS system (YYYYMMDD).                                  |